



MID-AMERICA COUNCIL

BOY SCOUTS OF AMERICA

MAC COMMISSIONER BELT BUCKLE AWARD APPLICATION

Name _____ District _____

Address _____ Scouting position _____

City _____ State _____ Zip _____ Phone _____

Mark One: Unit Commissioner Roundtable Commissioner Assistant District Commissioner
 District Commissioner Council Commissioner Assistant Council Commissioner

Training Requirements

Basic Commissioner Training (date completed) _____

Commissioner Key (date awarded) _____

Service Tenure Requirements (minimum of three consecutive years as commissioner)

From _____ to _____
Year Year

Unit Service

I serve as the unit commissioner for the following units: _____
Or

I serve as the Roundtable Commissioner: _____
Yes No

OFFICE USE ONLY	
	District Commissioner Approval _____
Date: _____	Council Commissioner Approval _____
	Data Recorded Date: _____ By: _____